

*Petit. Counsel* UNITED STATES DISTRICT COURT FOR THE DISTRICT OF MONTANA  
*Resp. Counsel* TRANSCRIPT DESIGNATION AND ORDERING FORM  
*Please read instructions.*

1. NAME <i>Karl Geercken Steven Michaels</i>		2. PHONE NUMBER <i>212-210-9471 212-909-7265</i>	3. DATE 6/12/2014																																																
4. MAILING ADDRESS		5. E-MAIL ADDRESS	6. CITY <i>New York</i> 7. STATE <i>NY</i>																																																
8. ZIP CODE	9. JUDGE <i>Judge Watters</i>	10. CASE NAME <i>Pet. Natalia Potanina vs Resp. Stillwater Mining Comp.</i>																																																	
11. U.S. DISTRICT COURT CASE NUMBER <i>CV-14-19-BLG-SPW</i>		12. COURT OF APPEALS CASE NUMBER																																																	
13. ORDER FOR <table border="0"> <tr> <td><input type="checkbox"/> APPEAL</td> <td><input type="checkbox"/> CRIMINAL</td> <td><input type="checkbox"/> CRIMINAL JUSTICE ACT</td> <td><input type="checkbox"/> BANKRUPTCY</td> </tr> <tr> <td><input type="checkbox"/> NON-APPEAL</td> <td><input checked="" type="checkbox"/> CIVIL</td> <td><input type="checkbox"/> IN FORMA PAUPERIS</td> <td><input type="checkbox"/> OTHER - Specify</td> </tr> </table>				<input type="checkbox"/> APPEAL	<input type="checkbox"/> CRIMINAL	<input type="checkbox"/> CRIMINAL JUSTICE ACT	<input type="checkbox"/> BANKRUPTCY	<input type="checkbox"/> NON-APPEAL	<input checked="" type="checkbox"/> CIVIL	<input type="checkbox"/> IN FORMA PAUPERIS	<input type="checkbox"/> OTHER - Specify																																								
<input type="checkbox"/> APPEAL	<input type="checkbox"/> CRIMINAL	<input type="checkbox"/> CRIMINAL JUSTICE ACT	<input type="checkbox"/> BANKRUPTCY																																																
<input type="checkbox"/> NON-APPEAL	<input checked="" type="checkbox"/> CIVIL	<input type="checkbox"/> IN FORMA PAUPERIS	<input type="checkbox"/> OTHER - Specify																																																
14. TRANSCRIPT REQUESTED - Specify portion(s) and date(s) of proceeding(s) for which transcript is requested. <table border="1"> <thead> <tr> <th>PORTIONS</th> <th>DATE(S)</th> <th>REPORTER</th> <th>PORTIONS</th> <th>DATE(S)</th> <th>REPORTER</th> </tr> </thead> <tbody> <tr> <td>Change of Plea</td> <td></td> <td></td> <td>Closing Argument - Plaintiff</td> <td></td> <td></td> </tr> <tr> <td>Pre-trial Proceeding</td> <td></td> <td></td> <td>Closing Argument - Defendant</td> <td></td> <td></td> </tr> <tr> <td>Voir Dire</td> <td></td> <td></td> <td>Settlement Instructions</td> <td></td> <td></td> </tr> <tr> <td>Opening Statement - Plaintiff</td> <td></td> <td></td> <td>Jury Instructions</td> <td></td> <td></td> </tr> <tr> <td>Opening Statement - Defendant</td> <td></td> <td></td> <td>Sentencing</td> <td></td> <td></td> </tr> <tr> <td>Testimony - Specify Witness</td> <td></td> <td></td> <td>Other - Specify</td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td>EVIDENTIARY</td> <td>6/12/2014</td> <td>Tina Brilz</td> </tr> </tbody> </table>				PORTIONS	DATE(S)	REPORTER	PORTIONS	DATE(S)	REPORTER	Change of Plea			Closing Argument - Plaintiff			Pre-trial Proceeding			Closing Argument - Defendant			Voir Dire			Settlement Instructions			Opening Statement - Plaintiff			Jury Instructions			Opening Statement - Defendant			Sentencing			Testimony - Specify Witness			Other - Specify						EVIDENTIARY	6/12/2014	Tina Brilz
PORTIONS	DATE(S)	REPORTER	PORTIONS	DATE(S)	REPORTER																																														
Change of Plea			Closing Argument - Plaintiff																																																
Pre-trial Proceeding			Closing Argument - Defendant																																																
Voir Dire			Settlement Instructions																																																
Opening Statement - Plaintiff			Jury Instructions																																																
Opening Statement - Defendant			Sentencing																																																
Testimony - Specify Witness			Other - Specify																																																
			EVIDENTIARY	6/12/2014	Tina Brilz																																														
15. ORDER <table border="1"> <thead> <tr> <th rowspan="2">CATEGORY</th> <th rowspan="2">ORIGINAL Includes certified copy to clerk for records of the Court</th> <th rowspan="2">FIRST COPY</th> <th rowspan="2">ADDITIONAL COPIES</th> <th colspan="3">FORMAT REQUESTED</th> </tr> <tr> <th colspan="2">Each format is billed as a separate transcript copy.</th> <th>Specify File Format</th> </tr> </thead> <tbody> <tr> <td>30-Day</td> <td>\$3.65/page</td> <td>\$ .90/ page</td> <td>\$ .60 page</td> <td><input type="checkbox"/> Full Size</td> <td><input type="checkbox"/> A-Z word index</td> <td><input type="checkbox"/> ASCII <input type="checkbox"/> A-Z word index PDF <input type="checkbox"/></td> </tr> <tr> <td>14-Day</td> <td>\$4.25/page</td> <td>\$ .90/page</td> <td>\$ .60/page</td> <td><input type="checkbox"/> Full Size</td> <td><input type="checkbox"/> A-Z word index</td> <td><input type="checkbox"/> ASCII <input type="checkbox"/> A-Z word index PDF <input type="checkbox"/></td> </tr> <tr> <td>7- Day</td> <td>\$4.85/ page</td> <td>\$ .90/ page</td> <td>\$ .60/page</td> <td><input type="checkbox"/> Full Size</td> <td><input type="checkbox"/> A-Z word index</td> <td><input type="checkbox"/> ASCII <input type="checkbox"/> A-Z word index PDF <input type="checkbox"/></td> </tr> <tr> <td>DAILY</td> <td>\$6.05/page</td> <td>\$1.20/ page</td> <td>\$ .90/page</td> <td><input type="checkbox"/> Full Size</td> <td><input type="checkbox"/> A-Z word index</td> <td><input type="checkbox"/> ASCII <input type="checkbox"/> A-Z word index PDF <input type="checkbox"/></td> </tr> <tr> <td>HOURLY</td> <td>\$7.25/page</td> <td>\$1.20/ page</td> <td>\$ .90/page</td> <td><input type="checkbox"/> Full Size</td> <td><input type="checkbox"/> A-Z word index</td> <td><input type="checkbox"/> ASCII <input type="checkbox"/> A-Z word index PDF <input type="checkbox"/></td> </tr> </tbody> </table>						CATEGORY	ORIGINAL Includes certified copy to clerk for records of the Court	FIRST COPY	ADDITIONAL COPIES	FORMAT REQUESTED			Each format is billed as a separate transcript copy.		Specify File Format	30-Day	\$3.65/page	\$ .90/ page	\$ .60 page	<input type="checkbox"/> Full Size	<input type="checkbox"/> A-Z word index	<input type="checkbox"/> ASCII <input type="checkbox"/> A-Z word index PDF <input type="checkbox"/>	14-Day	\$4.25/page	\$ .90/page	\$ .60/page	<input type="checkbox"/> Full Size	<input type="checkbox"/> A-Z word index	<input type="checkbox"/> ASCII <input type="checkbox"/> A-Z word index PDF <input type="checkbox"/>	7- Day	\$4.85/ page	\$ .90/ page	\$ .60/page	<input type="checkbox"/> Full Size	<input type="checkbox"/> A-Z word index	<input type="checkbox"/> ASCII <input type="checkbox"/> A-Z word index PDF <input type="checkbox"/>	DAILY	\$6.05/page	\$1.20/ page	\$ .90/page	<input type="checkbox"/> Full Size	<input type="checkbox"/> A-Z word index	<input type="checkbox"/> ASCII <input type="checkbox"/> A-Z word index PDF <input type="checkbox"/>	HOURLY	\$7.25/page	\$1.20/ page	\$ .90/page	<input type="checkbox"/> Full Size	<input type="checkbox"/> A-Z word index	<input type="checkbox"/> ASCII <input type="checkbox"/> A-Z word index PDF <input type="checkbox"/>	
CATEGORY	ORIGINAL Includes certified copy to clerk for records of the Court	FIRST COPY	ADDITIONAL COPIES	FORMAT REQUESTED																																															
				Each format is billed as a separate transcript copy.		Specify File Format																																													
30-Day	\$3.65/page	\$ .90/ page	\$ .60 page	<input type="checkbox"/> Full Size	<input type="checkbox"/> A-Z word index	<input type="checkbox"/> ASCII <input type="checkbox"/> A-Z word index PDF <input type="checkbox"/>																																													
14-Day	\$4.25/page	\$ .90/page	\$ .60/page	<input type="checkbox"/> Full Size	<input type="checkbox"/> A-Z word index	<input type="checkbox"/> ASCII <input type="checkbox"/> A-Z word index PDF <input type="checkbox"/>																																													
7- Day	\$4.85/ page	\$ .90/ page	\$ .60/page	<input type="checkbox"/> Full Size	<input type="checkbox"/> A-Z word index	<input type="checkbox"/> ASCII <input type="checkbox"/> A-Z word index PDF <input type="checkbox"/>																																													
DAILY	\$6.05/page	\$1.20/ page	\$ .90/page	<input type="checkbox"/> Full Size	<input type="checkbox"/> A-Z word index	<input type="checkbox"/> ASCII <input type="checkbox"/> A-Z word index PDF <input type="checkbox"/>																																													
HOURLY	\$7.25/page	\$1.20/ page	\$ .90/page	<input type="checkbox"/> Full Size	<input type="checkbox"/> A-Z word index	<input type="checkbox"/> ASCII <input type="checkbox"/> A-Z word index PDF <input type="checkbox"/>																																													
16. & 17. CERTIFICATE OF SERVICE, DISTRIBUTION and PAYMENT <p>E-file this form with the clerk's office, mail to opposing counsel if they are not electronic filers and serve the court reporter.            If payment is authorized under CJA, complete CJA 24 form through box 15 and attach to this order when e-filing.            Financial arrangements must be made with the court reporter before transcript is prepared.</p> <p>I certify that this form has been served on the court reporter this date: <u>6/12/2014</u> Attorney signature: <u>Karl Geercken</u>            Date order received by court reporter: _____ Expected transcript completion date: _____</p>																																																			